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Application Number	10/750,753
Filing Date	1/2/04
First Named Inventor	Hopkins
Art Unit	3765
Examiner Name	
Attorney Docket Number	0801-1010

I hereby revoke all previous powers of attorney given in the above-identified application.

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☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name	Tim Hopkins		
Signature			
Date	6/16/04	Telephone	(404) 610-0716

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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